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URBAN DISTRICT COUNCIL

CLAYTON-LE-MOORS

1945

A N N U A L R E P O R T

of the

Health of Clayton-le-Moors

by

Dr. T. S. HALL,

and

J. H. BRIDGE

Sanitary Inspector.

TO THE

CHAIRMAN AND MEMBERS OF THE URBAN DISTRICT

COUNCIL OF CLAYTON-le-MOORS

Mr. Chairman, Ladies and Gentlemen,

I have pleasure to present the Medical Officer's Report upon the health of the Urban District for the year 1945.

You will remember 1945 as the year of Victory. It saw the standing down of the LOCAL CIVIL DEFENCE SERVICES initiated in 1938 and which served under varying circumstances, and under different leaders, but always with honour and enthusiasm, for the seven years of the Emergency.

I resumed my position as your Medical Officer with effect from 1st October 1945, having been embodied with my Territorial Unit on the 25th August 1939.

My last association with the Urban District had been at the First Aid Post on the night of 24th August 1939. I left the Post with confidence and pride in the personnel, and it was a peculiar pleasure to me to be kept in touch with them throughout the War, through their admirable Secretary, Mrs. Iddon, and my friend and colleague Mr. Bridge. To these, and to the Medical Officers of the War Years, Dr. Dodd, Dr. Robertson, Dr. Jessie Davidson, and Dr. Woods, our thanks are due, and I write my first Annual Report since that for 1938 with sincere appreciation of their valuable service.

STATISTICS AND SOCIAL CONDITIONS.

Area in acres	1060
Population. Census 1931	7909
Resident Population (mid 1945)	6410
No. of inhabited houses census 1931	2101
" " " " 1945	2223
Rateable Value	£41406
Sum represented by a penny rate	£156

Only with some hesitation do I record the impressions of one returned ex-serviceman. My first care in this Area has always been the children, for whom I was primarily employed by the County Authority when I came here in 1934.

In your Urban District of which I wrote in my Annual Report for 1938, unemployment was rife, and family incomes low. Up till the end of 1945 we may say that unemployment was nil and wages high. Have the children benefitted, and are they better now than then?.

On resuming duty in October 1945, I was dismayed at the falling off of the standards of Home Care which was evident: and which I find alluded to in the Reports for 1941 and 1942 by Dr. Dodd, and that for 1943 by Dr. Robertson. As I write this, a year after my return, I realise that many children are being well looked after, but I still feel that many are having less care than is proper, while in some few households the standards of child care, even under our constant pressure, are shockingly low.

You were good enough to promise me the full support of the Council when I mentioned this matter, and my impressions, to the Council at the last meeting of 1945.

To say that the underlying causes of lack of care for children are complex is but a half truth. The prime underlying cause is human selfishness, born of active wickedness or passive sloth.

The wise provisions of Westminster and Whitehall provide a beam head, as it were, for attacks on neglect and verminous infestation, but cure could be quicker were we able to change the adult heart. The cure of neglect by administration is complex indeed.

The present position is this: A few families - perhaps no more than half a dozen outstanding ones, whom any of your Health Officials could name at once - are not only giving us grounds to suspect them of being guilty of neglect of their own children, but are influential in spreading and maintaining this evil around them. Many border-line cases of carelessness will never mend while these bad cases defy us, and while they know that our time is occupied on the worst offenders. The latter are very clever, and to bring them to book is requiring time and effort which other work should have. Since the evil must be tackled, however, I have been collecting evidence for twelve months now in the worst cases, and have now got sufficient to convince most people. What I am referring to is failure to give children proper Home Care, to wash them, to give them decent meals, and clothing and bedclothes, and to attend to the cleanliness of clothing and bedclothes and bodies and heads. No unnatural standard is required; we scarcely notice the dirty face of the healthy child, but when accumulated grime causes dermatitis, sores and vermin, something must be done about it, for such conditions endanger not only health, but sometimes even life itself, in the case of a debilitated child.

It is a grave matter to remove children from their parents on the grounds of neglect; and before one does so many visits must be paid and many opportunities of reform must be offered. (A few have taken eleventh-hour heed to warnings and have maintained improvement, to the enormous benefit of the children concerned.) So the pursuit of a few families is occupying half the time available for all Public Health activity, to the detriment of more obvious and necessary work. For, for every visit and letter of admonition to recalcitrant families, the routine care of two or three wholesome families must be foregone or postponed, often for a long time.

This is a situation which "has no future to it", and one to which Public Opinion must call a halt.

Why do I enlarge on these matters here? Because the people I refer to are handicapping our efforts for Child Welfare and general Public Health work in the way I have described, and the Council should know it.

On the day I write this, I have seen 6 children of one family in the same school in Clayton-le-Moors, all with infested heads, and medical records show that they have never been otherwise since they came here years ago. (Your children may sit beside them.) Yet this is my first visit to this school in 14 months because I am having to spend so much time on other malefactors.

What can the Council do? If nothing else, it can try to be patient with a Health Staff who cannot do everything at once. Many important aspects of Health work are having to wait for attention - the control of milk and milk products, for example, is a matter deserving more care. An enlightened Public Opinion can give most encouraging support. Your help will continue to be needed, and to be appreciated fully, as we persevere with our efforts to get every child the measure of health it should have.

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VITAL STATISTICS

		Total	Male	Female
Live Births	(Legitimate.....	102	57	45
	(Illegitimate.....	5	5	-
	(Total.....	107	62	45

		Total	Male	Female
Still Births	(Legitimate.....	3	1	2
	(Illegitimate.....	-	-	-
	(Total	3	1	2

	Total	Male	Female
Deaths.....	113	56	57
Deaths of infants under 1 year of age.....	5	1	4

Population for Birth Rate.....6705

Live birth-rate per 1,000 of estimated population.....	16.6
Crude death-rate " " " " "	17.6
Death-rate from tuberculosis of respiratory system per 1,000 of estimated population.....	0.93
Death-rate from cancer per 1,000 of estimated population.....	2.18
Maternal mortality rate per 1,000 live births.....	Nil
Maternal mortality rate per 1,000 total live and still births..	Nil
Rate of deaths under 1 year per 1,000 live births.....	84

DEATHS FROM PUERPERAL CAUSES	DEATHS
Puerperal and post-abortive sepsis.....	Nil
Other maternal causes.....	Nil

CAUSES OF DEATHS DURING 1945	Male	Female	Total
Tuberculosis of respiratory system.....	3	3	6
Other forms of Tuberculosis.....	-	-	-
Cancer of buccal cavity and oesoph:(M). Uterus (F)	1	4	5
Cancer of stomach duodenum.....	-	2	2
Cancer of breast.....	-	1	1
Cancer of all other sites.....	4	2	6
Diabetes.....	-	-	-
Intra-cranial vascular lesions.....	6	5	11
Heart diseases.....	19	18	37
Other diseases of circulatory system.....	2	-	2
Bronchitis.....	4	5	9
Pneumonia.....	3	1	4
Other respiratory diseases.....	1	-	1
Nephritis.....	1	1	2
Premature birth.....	1	-	1
Congenital malformations birth injuries (infant).....	1	2	3
Suicide.....	-	1	1
Road Traffic Accidents.....	-	-	-
Other violent causes.....	2	-	2
Other causes.....	3	7	10
Whooping cough	-	1	1
Influenza.....	-	1	1
Measles.....	1	-	1
Ulcer of stomach and duodenum.....	1	-	1
Diarrhoea under 2 years.....	1	-	1
Other digestive diseases.....	2	3	5
	56	57	113

	DEATHS
Cancer (all ages).....	14
Measles (all ages).....	1
Whooping Cough (all ages).....	1
Diarrhoea (under 2 years of age).....	1

Birth-rates, Civilian Death-rates, Analysis of Mortality, Maternal Mortality and Case rates for certain Infectious diseases in the Year 1945. Provisional figures based on Weekly and Quarterly Returns.

	England and Wales	126 C.Bs. and Great Towns including London	148 Smaller Towns Resident Pop. 25,000 - 50,000 at 1931 Census	London Adm. County
	Rates per 1,000 Civilian Population:-			
Live Births	16.1	19.1	19.2	15.7
Still "	0.46	0.58	0.53	0.40
Deaths				
All Causes	11.4	13.5	12.3	13.8
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00
Scarlet Fever	0.00	0.00	0.00	0.00
Whooping Cough	0.02	0.02	0.01	0.02
Diphtheria	0.02	0.02	0.02	0.01
Influenza	0.08	0.07	0.07	0.07
Smallpox	-	-	-	-
Measles	0.02	0.02	0.02	0.01
	Rates per 1,000 Live Births:-			
Deaths under 1 Year of Age	46	54	43	53
Deaths from Diarrhoea and Enteritis under 2 years of age	5.6	7.8	4.5	7.6
	Rates per 1,000 Civilian Population:-			
Notifications:-				
Typhoid Fever	0.01	0.01	0.01	0.01
Paratyphoid Fever	0.01	0.00	0.01	0.00
Cerebro Spinal Fever	0.05	0.05	0.05	0.06
Scarlet Fever	1.89	2.02	2.03	1.57
Whooping Cough	1.64	1.65	1.47	1.25
Diphtheria	0.46	0.52	0.56	0.31
Erysipelas	0.25	0.28	0.24	0.31
Smallpox	0.00	0.00	-	0.00
Measles	11.67	10.89	11.19	9.03
Pneumonia	0.87	1.03	0.72	0.78

Rates per 1,000 Total Births (Live and Still):-

(a) Notifications:-

Puerperal Fever / Puerperal Pyrexia	9.93	12.65	8.81	3.60 / 15.87

(b) Maternal Mortality - England and Wales:-

No.140 - Abortion with Sepsis	No.141 - Abortion without Sepsis	No.147 Puerperal Infections	Nos.142-6 149-150 Other
0.25	0.08	0.24	1.03

Attention:- Mortality per million women aged 15-45 - England and Wales.-

No. 140 With Sepsis	No. 141 Without Sepsis
18	6

As regards the statistics above, the birth-rate of 1945 was down as compared with 1944. It may be because of the increased separations and stresses of the last year of the war. The Death-rate was increased, as was the Death-rate from Tuberculosis and, notably, from Cancer. But in truth the totals are too small to enable very useful comparisons to be made. Our pleasure in having no maternal deaths to record, for the second year in succession, may be tempered by the consideration that many of our mothers are confined outside the District.

The "Infantile Mortality Rate" (or Death-rate of children under 1 year per 1,000 live births) was 84, twice that of the year before, half as much again as the mean of 5 previous years in Clayton-le-Moors, and nearly twice as much as the average 1945 rate of 1.3 "Smaller Towns". Here again the total numbers are not large, so that an additional 1 or 2 cases make a substantial difference, but this particular figure is generally regarded as a useful index of an Area's care for its children, so the increase is not reassuring: and possibly may lend some additional weight to the observations I have made above.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

AMBULANCE FACILITIES

The ambulance of the Darwen Corporation is used to convey patients to the Infectious Diseases Hospital at Darwen.

NURSING

The Accrington District Nursing Association provides home nursing in Clayton-le-Moors.

There have been very few enquiries for Home Help and no applications to be registered under the Home Help Scheme have been received.

MATERNITY AND CHILD WELFARE

This service is administered by the Lancashire County Council. Infant Welfare Clinics were continued weekly and Ante and Post-Natal Clinics monthly. The help of the ladies of the voluntary committee at the Infant Welfare Clinic is again gratefully acknowledged.

SCHOOL MEDICAL INSPECTION

The school medical service is provided by the County Council. Medical Inspection was carried out by the Medical Officer of Health as Divisional School Medical Officer.

The School Clinics continued as usual at Rishton comprising Minor Ailment, Orthopaedic, Ophthalmic and Dental Clinics.

Immunisation Clinics are held regularly at the Welfare Centre. This is again meeting with a great response; the injections are given by the Medical Officer of Health.

HOSPITALS

No hospitals or Registered Nursing Homes existed within the Urban District.

HEALTH EDUCATION

The services outlined above are available to all and are, generally speaking, well used. Efforts are made to secure a wider use of the Health Services by the personal recommendation of the Medical Officer, Health Visitors, School Teachers and others. Posters are exhibited at the Town Hall, Welfare Centre, Clinics and in the schools.

SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLY

The Accrington District Gas and Water Board undertake this service and make the necessary tests of the quality of the water. The supply was constant and sufficient and as every house is served, no extension of pipes supplies has been required.

DRAINAGE AND SEWAGE.

This service is undertaken by the Clayton-le-Moors and Great Harwood Joint Sewerage Board, and extend to all premises save a few isolated farms. Periodical testing and flushing was carried out.

Scavanging is carried out by the Sanitary Authority under the Council's Surveyor's supervision.

Further details regarding Sanitary circumstances, Housing and Inspection and Supervision of Food, are contained in the report of the Sanitary Inspector.

INFECTIOUS DISEASES

The following table shows the number of new cases of tuberculosis notified during the year and the number of deaths from the disease which occurred in the various age groups.

TUBERCULOSIS

Age Periods	NEW CASES				DEATHS			
	Respiratory		Non Respiratory		Respiratory		Non Respiratory	
	M.	F	M	F	M	F	M	F
Years								
0.....	-	-	-	-	-	-	-	-
1.....	1	-	-	-	-	-	-	-
5.....	-	-	-	-	-	-	-	-
10.....	1	-	-	-	-	-	-	-
15.....	-	-	-	-	-	-	-	-
20.....	-	-	-	-	-	1	-	-
25.....	1	-	-	-	-	-	-	-
35.....	1	1	-	-	1	1	-	-
45.....	-	1	-	-	-	1	-	-
55.....	1	-	-	-	1	-	-	-
65 and upwards	-	-	-	-	-	-	-	-
Totals	5	2	-	-	2	3	-	-
	7		-		5		-	

The Tuberculosis Service for the area is administered by the County Council and one of their principle dispensaries is only a few yards outside the boundary of the Urban District.

This Dispensary is constantly open with a full clerical and health visiting staff. One consultant and one other Tuberculosis Officer of the County Council attend several times a week to see patients recommended for consultation by local Practitioners or cases found by the Medical Officer in course of routine work in schools, ante-natal or welfare clinics.

NOTIFIABLE DISEASES OTHER THAN TUBERCULOSIS

The table overleaf shows the number of cases of infectious disease, other than tuberculosis during the year.

Notifiable Diseases	Total Cases all ages	Removed to Hospital	Deaths in Hospital	Total Deaths
Scarlet Fever	2	1	-	-
Diphtheria (including membraneous croup)	-	-	-	-
Measles	102	-	-	-
Whooping Cough	27	-	-	-
Cerebro Spinal Fever	-	1	-	-
Acute Pneumonia	5	-	-	5
Dysentery	1	-	-	-
Erysipelas	1	-	-	-
Total	143	2	-	5

There was no minor epidemic of any infectious disease during the year.

The Local Authority has now contracted with the Borough of Darwen to admit infectious cases to their Infectious Diseases Hospital.

No case of Diphtheria was reported during the year.

DIPHTHERIA IMMUNISATION

During 1944, 89 children in Clayton-le-Moors were immunised against diphtheria.

The following table indicates the number of children immunised in 1945, in the various age groups.

Ages Years	No. of children completely immunised	No. of children who ceased to attend before completion of course
Under 1	1	-
1	48	1
2	15	1
3	3	-
4	-	-
5	1	-
6	3	-
7	2	-
8	-	-
9	-	-
10	-	-
11	-	-
12	-	-
13	-	-
14	-	-
TOTAL	73	2

67 being pre-school children and 6 school children.

No. of children who failed to complete course - 2 pre-school children.

No. of booster injections - 5 school children

The prophylactic used for immunisation was A.P.T.; two injections being given with an interval of 4 weeks being allowed between the first and second injection.

I again thank members of the Council for their courtesy and help and the interest shown in matters relative to the Public Health in the District.

Yours faithfully,

T. S. HALL,

MEDICAL OFFICER OF HEALTH.

SANITARY INSPECTOR'S REPORT.

Council Offices,

Clayton-le-Moors.

To the Chairman and Members of the
Clayton-le-Moors Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit my Annual Report for the year 1945.

SANITARY INSPECTIONS.

The number of premises visited during 1945 was 212.

From these visits 278 nuisances and defects were noted and 252 were remedied.

159 informal notices were issued.

CLOSET ACCOMMODATION.

No. of houses using:-

Fresh Water Closets (connected to sewers)	541
Waste Water Closets (estimated)	1673
Pail Closet System	6
Privy Midden System	3
Total number of inhabited houses	2223

191 blocked drains in connection with slopwater closets were opened.

During the year 12 waste water closets were converted to fresh water closets.

ASHPIT ACCOMMODATION.

There are 2218 moveable ashbins.

The collection of refuse is carried out weekly by the Surveyor's Department, and is tipped satisfactorily at Butterworth Holme. The tipping is controlled.

WORK DONE BY THE SURVEYOR'S DEPARTMENT.

Ashpits emptied	15
Ashpails emptied	117210
Privy pails	156
Loads of house refuse removed to tips	1046
Horse carts of street sweepings removed to tips	30
Hand carts of street sweepings removed to tips	1372
Tumblers of Gulley Refuse removed to tips	185
Houses fumigated	10
Blocked drains and W.C.'s opened	131
New houses certified as fit for human habitation	-

UNDER THE SHOPS ACT, 1934.

No infringement of the above act was observed.

ERADICATION OF BEDBUGS.

The number of houses found to be infested were:-

Council houses..... 1
Other houses 1

OFFENSIVE TRADES.

The principal type of offensive trade within this district is soap boiling, and no action was required to be taken, as these works are very satisfactory.

WORKSHOPS AND WORKPLACES.

The number on the register was 52 and their condition on the whole was satisfactory.

The number of factories inspected with mechanical power..... 5

The number of factories inspected without mechanical power..... 3

The number of defects found on these premises were:-

Insufficient sanitary conveniences..... 1

Other offences 14

HOUSING STATISTICS FOR THE YEAR 1945.

No. of houses erected during the year:-

(a) Total including numbers given separately under (b)	-
(i) By the Local Authority	-
(ii) By other Local Authorities	-
(iii) By other bodies or persons	-
(b) With State assistance under the Housing Acts:-	
(i) By the Local Authority (included under (a)(i) above)	-
(ii) By other bodies (included under (a)(iii) above)	-

Inspection of dwelling-houses during the year:-

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) 29

(b) Number of inspections made for the purpose 51

(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 -

(b) Number of inspections made for the purpose -

(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation -

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation -

Remedy of defects during the year without service of formal notices:-

Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers. 23

Action under statutory powers during the year:-

(a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs 3

(2) Number of dwelling-houses which were rendered fit after service of formal notices:-

(a) By owners 1

(b) By local authority in default of owners -

(b) Proceedings under Public Health Acts.

(1) Numbers of dwelling-houses in respect of which notices were served requiring defects to be remedied -

(2) Number of dwelling-houses in which defects were remedied after service of formal notices:- -

(a) By owners

(b) By local authority in default of owners -

(c) Proceedings under sections 11 and 13 of the Housing Act, 1936.

(1) Number of dwelling-houses in respect of which Demolition Orders were made -

(2) Number of dwelling-houses demolished in pursuance of Demolition Orders -

Housing Act 1936. Part IV. Overcrowding.

(a)	(1) Number of dwellings overcrowded at the end of the year	1
	(2) Number of families dwelling therein	2
	(3) Number of persons dwelling therein	8
(b)	Number of new cases of overcrowding reported during the year	-
(c)	(1) Number of cases of overcrowding relieved during the year	-
	(2) Number of persons concerned in such cases	-

HOUSING CONDITIONS.

The general observations as to housing conditions are as follows:-

The majority of the houses are stone built, of the working class type, without the essential amenities such as bath and indoor W.C.'s. A large proportion of the W.C.'s being of the waste water flush type, and situated in the back yard, some little distance from the back door.

Ground dampness exists extensively, in some cases permeating internal walls to a height of three feet.

There are no back to back houses.

Overcrowding is not excessive, but there are many houses containing two or more families, and to meet the demand of ex-servicemen married during the last war, and those with mixed families, the Council contemplate erecting at some future period 120 houses of the 3 bedroom type.

There are however, at the moment, 8 bungalows being erected for aged people, which it is hoped will release certain large houses for families, and another 8 houses are to be erected in the near future, again with priority to exservicemen and women.

There has been no important change in the population during 1945, but a large works previously on war production has now been taken over for artificial silk manufacturing, with a probable influx of workpeople, desirous of living near their work.

INSPECTION AND SUPERVISION OF FOOD.

The slaughtering of all animals has been carried on outside the district.

The following foodstuffs were examined and condemned as unfit for human consumption:-

Canned Meat	107 lbs.
Canned Fruit and Preserves..	18 lbs.
Canned Fish	7 lbs.
Canned Vegetables	1 lb.
Butter	15 lbs.

MILK SUPPLY.

Under the Milk and Dairies (Consolidation)Act, 1915, and Milk and Dairies (Amendment) Act, 1922, and the Milk and Dairies Order, 1926, inspections were made.

THE MILK (SPECIAL DESIGNATIONS) ORDER, 1936 and 1938.

No. of dealers' licences (including supplementary licences) issued by the Local Authority during 1945, in respect of:-

Tuberculin Tested Milk:-

(i) Bottling .....None.
(ii) Distribution .....None.

"Accredited" Milk:-

(i) Bottling .....None.
(ii) Distribution .....None.

No. of licences issued in respect of "Pasteurised" Milk:-

Pasteurising Plant.....None
Retail Distributors 9

FARMS.

No. of Dairy Farms	9
Approximate No. of Cows in district	125
No. of Cow-Keepers (including Dairy farms).	9
No. on Register	9
No. of inspections during the year	31
No. of Dairymen (other than Cow-Keepers) or Milk purveyors	35

INFECTIOUS DISEASES.

3 houses were disinfected during the year after infectious disease.

6 books were fumigated from the library prior to re-circulation.

Yours obediently,

JOHN H. BRIDGE,

Sanitary Inspector.